



## Department of Public Health and Human Services

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**Steve Bullock, Governor**

**Richard H. Opper, Director**

February 3, 2016

Dear

We are pleased to invite comment from all Tribal Chairs, Tribal Presidents, Urban Indian Center Directors and Indian Health Service regarding an amendment to the Behavioral Health Severe Disabling Mental Illness (SDMI) Home and Community Based Services Waiver. The Department of Public Health and Human Services will submit the waiver amendment request for approval to the Centers for Medicare and Medicaid Services on or before March 31, 2016, for an effective date of July 1, 2016.

The SDMI Waiver currently serves 248 persons in the following regions of Montana:

- Butte-Silver Bow, including Urban Indians in Butte (Butte-Silver Bow, Beaverhead, Deer Lodge, Granite, Powell and Jefferson counties);
- Cascade, including tribal members on the Blackfeet, Fort Belknap and Rocky Boy's Reservations (Cascade, Blaine, Chouteau, Glacier, Hill, Liberty, Pondera, Phillips, Teton and Toole counties);
- Flathead, including tribal members on the Flathead Reservation (Flathead, Lake, Sanders and Lincoln counties);
- Lewis and Clark, including Urban Indians in Helena (Lewis and Clark, and Jefferson counties);
- Missoula, including Urban Indians in Missoula (Missoula and Ravalli counties); and
- Yellowstone, including Urban Indians in Billings and tribal members on the Crow and Northern Cheyenne Reservations (Yellowstone, Big Horn, Carbon, Stillwater and Sweet Grass counties).

The SDMI Waiver does not provide services on the Fort Peck Reservation, due to the very rural nature of the area and the limited capacity of this small waiver.

The amendment will make the following changes to the SDMI Waiver:

- Add coverage in Gallatin, Broadwater, Park and Madison counties, per the request of Service Area Authorities, Local Advisory Councils, and providers in these counties

who see a need for the services. The four counties represent the next largest metropolitan area that can support the waiver.

- Add the services Life Coach, Overnight Supports, and Companion, which were identified as assisting members who had previously utilized the bundled Supported Living service. Supported Living was eliminated at the waiver's last renewal, per CMS guidance that bundled services are not allowed.
- Increase the training requirements for Peer Support from 16 hours to a minimum of 30 hours.
- Reduce or eliminate the services Registered Nurse Supervision, and Dietician and Nutritional Counseling that were unutilized in State Fiscal Years 2013 and 2014.
- Eliminate Occupational Therapy as a waiver service. With the elimination of limits on therapies, this service will be provided through Medicaid state plan authority.

The estimated total annual fiscal impact of this amendment is \$632,725 for Waiver Year 1 (July 1, 2016 through June 30, 2017), and \$656,882 for Waiver Year 2 (July 1, 2017 through June 30, 2018).

The SDMI Waiver amendment application is available for review at <http://dphhs.mt.gov/amdd/Mentalhealthservices.aspx>. Comments can be made directly through the website. The state, upon request, will make available hard copies of the waiver amendment.

Also on or before March 31, 2016, DPHHS will submit a request to CMS to renew the Montana Big Sky HCBS Waiver, for an effective date of July 1, 2016.

The Montana Big Sky Waiver is designed to provide an elderly or disabled individual a choice of receiving long term care services in a community setting as an alternative to receiving long term care services in a nursing facility setting. It is a combination 1915(c) and 1915(b)(4) waiver, incorporating an extensive menu of services with a limited number of case management teams across the state.

The member must meet nursing home level of care and live in Montana. The Montana Big Sky Waiver is currently available to serve a total of 2,536 persons statewide.

The projected annual cost of services is approximately \$16,615 per member. The waiver changes will be cost neutral.

The requested changes for this renewal are:

- Moving the members funded under the Money Follows the Person grant to the Montana Big Sky Waiver on day 366 of the program; and
- Adding the waiver-specific HCBS Transition Plan to bring the Montana Big Sky Waiver into compliance with federal regulations issued by CMS on March 17, 2014, defining permissible Home and Community Based settings.

Montana's Health and Economic Livelihood Partnership (HELP) Act was implemented January 1, 2016, and includes the removal of limitations to occupational therapy, physical therapy and speech therapy under the Medicaid state plan. Maintenance therapies to prevent deterioration are non-covered state plan services and will continue to be provided by the Big Sky Waiver.

A public meeting will be held to discuss the Big Sky Waiver renewal and waiver-specific transition plan on February 24, 2016, from 10:00 a.m. to 12:00 p.m., at the Lee Metcalf Building, Room 111, 1520 East 6<sup>th</sup> Avenue, Helena, Montana. Individuals who need assistance to participate during this meeting should call (406) 444-4150. The public meeting can also be accessed by webinar. The link is <https://hhsmt.webex.com/hhsmt>, and the meeting password is "meeting".

The call in number and access code are:

Toll free # is 1-877-668-4490

Access code: 804 492 045

The Montana Big Sky Waiver renewal application and transition plan are available for review at <http://dphhs.mt.gov/SLTC/csb>. The state, upon request, will make available hard copies of the waiver renewal and transition plan.

Your questions and comments on the SDMI Waiver amendment and Big Sky Waiver renewal and transition plan can be submitted **through March 4, 2016**, addressed to Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator, at [mkulawik@mt.gov](mailto:mkulawik@mt.gov), (406) 444-2584, or Director's Office, PO Box 4210, Helena MT 59604.

Please let us know if you would like to arrange a date and time for us to discuss this waiver.

Sincerely,



Mary E. Dalton  
State Medicaid Director

Cc: Mary Lynne Old Coyote, Acting Interim CEO & COO, Rocky Boy Tribal Health Board  
Jason Smith, Director, Governor's Office of Indian Affairs  
Lesa Evers, Tribal Relations Manager, Department of Public Health and Human Services